PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10829101

		CLAIMS A	S FILED	- PART	1			CARALL	ENTEN			
			(Colur		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
T	OTAL CLAIM	12	1		•	1	RATE	FEE	ר י	RATE	FEE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 385.00	OR	BASIC FEI	+
Ţ	OTAL CHARGE	ABLE CLAIMS	2 n	ninus 20=	•			XS 9=		OR	X\$18=	
IN	DEPENDENT (2 minus 3 = *					X43=	 	┪¨	Yes		
M	JLTIPLE DEPE	NDENT CLAIM F	PRESENT							-OR		-
* If the difference in column 1 is less than zero, enter "0" in column 2							' l	+145=		OR	+290=	
	/ CLAMS AS AMENDED - PART II								<u></u>	OR	TOTAL	720
	11-	(Column 1)	(Column 2) (Column 3)					SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· / &	Minus	20		=		X\$ 9=		OR	X\$18=	
	Independent	ENTATION OF M	Minus	1 - 3	01 444	-		X43=		OR	X86=	
	··	LINIATION OF W	ULTIPLE DE	PENDENT	CLAIM		'	+145=		OR	+290=	
							L	TOTAL		OR	TOTAL	
		(Column 1)		(Colum	n 2)	(Column 3)	A	DDIT. FEE	L		ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		t		X\$ 9=		OR	X\$18=	
	independent	•	Minus	***		•		X43≃	÷	1 T	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR		
										OR	+290=	<u>_</u>
		(Column 1)					AD	TOTAL DIT. FEE		OR A	DOIT, FEE	
. T	`	CLAIMS		(Column		(Column 3)	_			_	• •	
AMENDMEN C		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=	Γ	X\$ 9=	1	OR	X\$18=	
	Independent		Minus .	***		*		X43≐		_	X86=	-
	FIRST PRESE	H			OR		-					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. **ADDIT SEE												
!! !!	the "Highest Nun the "Highest Nun	nber Previously P <u>ai</u> nber Previously Pai	d For IN THIS d For IN THI	S SPACE is le S SPACE is le	ss than	20, enter *20.*		TOTAL DIT. FEE	السيسا	OR A	TOTAL DOTT. FEE	
T 1	ne "Highest Numi	ber Previously Paid	For* (Total or	Independent)	is the h	ighest number	found	in the appr	opriate box	in colur	nn 1.	.